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PLAGUE IN THE UNITED STATES.

Subsequent to the information contained in last week's issue, 2 cases of plague in man and 14 in rodents have been notified in New Orleans.

Detailed statements of the plague-eradicative measures being carried out under the direction of the Federal Public Health Service at the three existing plague foci, namely, California, New Orleans, and Seattle, will be found on pages 2312-2316.

THE MAKING OF HEALTH OFFICERS.

THE POSSIBILITY OF STATE DEPARTMENTS OF HEALTH IMPROVING THE EFFICIENCY OF LOCAL HEALTH OFFICERS BY MEANS OF CORRESPONDENCE COURSES IN HEALTH ADMINISTRATION AND ALLIED SUBJECTS.

By JOHN W. TRASK, Assistant Surgeon General, United States Public Health Service.

In the United States at the present time one of the greatest handicaps to rational and effective health administration is the lack of knowledge of public-health work and of the control of disease on the part of many local health officials, and especially those of small cities, villages, and rural communities. This lack of knowledge is in most instances not due to unusual ignorance but rather to the fact that there are exceedingly few men with requisite training from among whom the thousands of local health officers can be appointed.

It would seem practicable, however, for the State health department, through a correspondence course, to give a very serviceable and quite satisfactory course of instruction to its local health officers. It would be possible in this way to use in villages and townships men who had had no medical training but who, after a year's correspondence course, would perform the duties of township or village health officer in a way superior to previous incumbents. Such a correspondence course might be arranged by the State health department sending out each week to the local health officers of the State a printed or multigraphed lesson on some single point in the control of disease. Such a lesson should not be so long that it would tax the patience or the limits of concentration of the health-officer students. It should cover but a single circumscribed topic, so that each week the loca health officer would learn some definite thing which would be useful to him in his work. The time taken for such a lesson would not be great. Lessons could be sent out at weekly intervals and thus spaced they would not crowd each other nor obliterate those previously learned. In a year's time the health-officer student would have learned 52 lessons and would have mastered 52 ideas regarding the control of disease. Most local health officers would in the course of one, two, or three years' instruction in this way become competent and efficient, and superior to most of those at present obtainable. Not only that, but those without previous medical training would, in townships and villages, become probably more efficient and satisfactory health officers than some of the physicians who are holding these positions at the present time, for the medical man without other training, be he never so capable as a physician, knows but little more about the community control of disease than the person without medical training. The nonmedical health officer would eliminate, too, the embarrassing complications arising from the unfortunate custom of making practicing physicians health officers in villages and rural districts where, in performing their official duties, they are placed in the position of interfering with the practice of competing practitioners.

Not only would such a correspondence course improve to a large degree the efficiency of local health officers, but it would constitute one more link to bind the various health units into an effective health organization.

In carrying on such a school it would be highly desirable to hold examinations at the end of the year on the lessons that had been sent out during the previous 12 months. These examinations could be held on the occasion of the annual conference of the local health officers of the State. Those passing a satisfactory examination might be given a certificate. The course should be progressive, each year taking up new subjects. The subjects treated the first year would serve for beginners year after year. The health officer who had taken the course for several years, had passed satisfactory examinations, and held certificates to that effect, would naturally make a much better health officer than those who had not had the course. Preference might be given to those holding such certificates.

The purpose of a correspondence course of this kind would be to have those acting as local health officers in small communities acquire some knowledge of public health administration without effort and without perceptible labor. There would, however, be many who would become interested and wish to go deeper into the subject. For these a well-selected course of reading would be an invaluable supplement to the primary correspondence course. For those who undertook the reading course there might be available periodic (annual probably) examinations on the subjects dealt with in the volumes included. The satisfactory passing of this examination should naturally receive proper recognition, and a special certificate or diploma might be issued.

Undoubtedly many persons other than health officers would desire to take these correspondence courses because of their educational value. It would seem to be desirable to encourage this, and those thus taking the courses and passing satisfactory examinations might upon request be enrolled as members of a State Sanitary Reserve Corps. The members of such a corps would be frequently found of service and their enrollment would markedly add to their interest in local health affairs. They would be a source of strength to local health departments.

MOSQUITOES AND MALARIA.

REPORT ON A SHORT TRIP IN EASTERN NORTH CAROLINA.

By Ch. Wardell Stiles, Professor of Zoology, United States Public Health Service.

Kinston, Moorehead City, and Jacksonville, all in eastern North Carolina, were visited to collect data in regard to the breeding places of mosquitoes, with special reference to malaria.

From both practical and theoretical points of view the mosquito problem of the places in question may be divided into an *external* and an *internal* problem.

The *internal problem* includes the mosquito-breeding places that are inside the town or in the immediate surroundings. The *external problem* includes the more distant breeding grounds, such as marshes, etc., from which mosquitoes may be blown into town under favorable conditions of wind, as light breezes from the direction of the marshes; or from which the mosquitoes may be brought in on railroad trains, or by persons driving in from the country.

The *internal* problem is, to a certain extent, dependent upon the *external* problem, for assuming that all of the mosquitoes in a town were to be killed off, the town might become infected again by mosquitoes blown in from the marshes or brought in on trains or in teams. Further, the importance of the *external* problem is dependent, to a great extent, upon the *internal* problem, for if mosquitoes are blown or brought into town, their invasion is a more serious matter in case they find in town places suitable for breeding than if the town presents no such breeding place.

It is difficult to state definitely the relative importance of the internal and the external problems in the places visited until the inter-